UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. H0002742--1065

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is the patent application of () application identifier or (X) first named inventor, Larry Casillas, entitled, for a(n):

APPARATUS AND METHOD OF SAMPLING SEMIVOLATILE COMPOUNDS

(X) Original Patent Application.						
() Continuing Application (prior application not abandoned): () Continuation () Divisional () Continuation-in-part (CIP) of prior application No: Filed on: () A statement claiming priority under 35 USC § 120 has been added to the specification.						
Enclosed are:						
(X) Specification: 25 T	Total Pages.					
(X) Claims: <u>4</u> To	otal Pages.					
(X) Abstract: <u>1</u> To						
(X) Formal Drawing(s): 5 Total Sheets.						
() Informal Drawing(s): [No of Sheets] Total Sheets.						
	(X) Oath or Declaration:					
, ,	Combined Declaration and Power	· · · · · · · · · · · · · · · · · · ·				
(X) Signed.	() Unsigned.	() Partially Signed.				
	or Application for Continuation/D		n which a converthe			
 Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying 						
	id is hereby incorporated herein by		ne accompanying			
	nent Deleting Inventor(s) Named in		FR § 163(d)(2)).			
() Power of Attorney.		(с. с.	3 (-)(-)).			
() Associate Power of Attorney.						
(X) A Check #2822 in the amount of \$810.00 for the Fees associated with this filing.						
() Preliminary Amendment.						
() A Duplicate Copy of this Form for Processing Fee Against Deposit Account.						
() A Certified Copy of Priority Documents (if foreign priority is claimed).						
() Information Disclosure Statement, Form PTO/SB/08A.						
(X) Return Receipt Postcard.						
(X) Assignment and Recor		₹.				
() Other:						
CLAIMS AS FILED						
FOR NO. FILE	ED NO. EXTRA	RATE	FEE			

		CLAIMS AS FILED		
FOR	NO. FILED	NO. EXTRA	RATE	FEE
Total Claims	20	-	\$18.00	
Independent Claims	3	-	\$86.00	
Multiple Dependent Clai	ms (if applicable)			
Assignment Recording F	ee			\$40.00
Basic Filing Fee				\$770.00
			Total Filing Fee	\$810.00
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Pursuant to 37 CFR §1.25, please charge any National Application Filing Fees set forth in 37 C.F.R. §1.16 or the Assignment Recording Fee set forth in 37 C.F.R. §1.21(h) or credit any overpayment to Ingrassia Fisher & Lorenz, P.C., Deposit Account No. 50-2091.

Respectfully submitted,
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